## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1 Par	AS
	7

In re U.S. Patent Application of	)
HUOTARI et al.	) Unit 3732
Application Number: 10/575,956	) Examiner:
Filed: November 21, 2006	) Hao D. Mai
For: DENTAL UNIT AND METHOD FOR FEEDING WATER	) .
ATTORNEY DOCKET No. PLAN.0002	)

Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **COVER LETTER**

Sir:

[x] The fee for submission of claims is calculated as shown below:

For	TOTAL WITH NEW CLAIMS ADDED	TOTAL Currently On File	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	24	24	4 (Over 20)	x \$52	0
Independent Claims	2	2	(Over 3)	x \$220	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$390	0 .
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).					
TOTAL		\$0			

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

[x] Response and Amendment to Office Action	[ ] Information Disclosure Statement
(with claim amendments)	[ ] sheets of replacement drawings
[ ] Substitute Spec. & marked-up copy	[ ] RCE
[ ] Terminal Disclaimer	[ ] Other:

[X]	extended pursuant to 37 C.F.R. § 1.136(a) for:  [x] one (1) month [] two (2) months [] three (3) months	
	The fee set in 37 C.F.R. § 1.17 for the extension of time is \$130.00 for a <u>large</u> entity.	
[ x ]	Credit card information for \$130.00 to cover to cover the 1-month extension fee and the IDS fee is enclosed.	
[ ]	Please charge my <b>Deposit Account Number</b> in the amount of to cover the fees for	
[ x ]	c Commissioner is hereby authorized to charge any additional fees associated with the communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to <b>Depote Count Number 12-0555</b> .	
	Respectfully submitted,	

Nullar Travele FOR:

Juan Carlos A. Marquez Registration No. 34,072

STITES & HARBISON PLLC

1199 North Fairfax Street, Suite 900 Alexandria, VA 22314

Telephone: (703) 739-4900 Facsimile: (703) 739-9577

Customer No. 38327

June 1, 2010